

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF RHODE ISLAND

FILED

1983 Civil Complaint NOV 14 A 11:27
For the District of Rhode Island
(Form mailed ~~NOV 13 2014~~ DISTRICT COURT
DISTRICT OF RHODE ISLAND)

I. Jody Lee Johnson
RI, DOC, Cranston RI 02920

Enter above the full name of all the plaintiff (s) in this action.

V.

city of cranston RI
cranston police department
ofc, Mathew Schaffran-#479
ofc, Nathan Bagshaw

Enter above the full name of all the defendant (s) in this action.

1. Previous Lawsuits

- A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment?

☐ Yes

☒ No

- B. If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)

1. Parties to the previous lawsuit

Plaintiffs: _____

Defendants: _____

CA CA 14 - 4995

2. Name of Court (if federal court, name the district, if state court, name the county):

3. Docket Number: _____

4. Name of judge to whom the case was assigned:

5. Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?)

6. Approximate date of filing law suit: _____

7. Approximate date of disposition: _____

II. Place of Present Confinement: Rhode Island - Dept of corrections - PO Box 8273 Cranston RI 02920

A. Did you present the facts relating to your complaint to the Warden or any of the prison officials? ☐ Yes ☒ No

B. If your answer is YES:

1. What steps did you take? Not Dept Related

2. What was the result? _____

C. If your answer is NO, explain why not: Not Dept of Corr Related

III. Parties

(In item A below, place your name in the first blank. Do the same for additional plaintiffs, if any.)

A. Name of plaintiff(s): _____

(In item B below, place the full name of the defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use item C for the names, position, and places of employment of any additional defendants.)

B. Defendant: _____ is employed as _____

_____ at _____

C. Additional Defendants: _____

IV. Statement of Claim

State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheet if needed.)

On March 22nd, in the county of Cranston R.I., when executing my arrest 3-4
Cranston city police officer's used excessive force, causing physical injury
and emergency hospitalization. please refer to attached sheet for in depth
detail's of the fact on the night of March 22nd 2014. I was subjected to
racial verbal abuse, while being pummled with feet and knees during arrest.
Unnecessary force during arrest/assault and bodily injury by officers
Brutal handcuffing, leading to broken fingers. while being handcuffed and
pummled with knees, bruising was inflicted to my rib's and back area,

While being forced to participate with a show up id, process a large officer would reach in to the patrol car, pull me buy my kneck out of the car, apply a choke hold on me, cutting short my oxygen and ability to breath, all while playing a flash light in my face for a witness.

"please see attatched brief"

V. Relief

State briefly exactly what you want the court to do for you. (Make no legal arguments. Cite no cases or statutes.)

Compensatory damages, punitive damages court cost and any other relief that the court deems appropriate.

Respectfully Submitted:

Signature:

Address:

Loely Zee Johnson
84042# Max-Security
Rhode Island DOC
Po Box 8273
Coarston RI 02920